

TRANSMITTAL FORM

Attorney Docket No.
BC999066/1501PIn re the application of: **Jennie CHING, et al.**Confirmation No: **7262**Serial No: **09/773,047**Group Art Unit: **2611**Filed: **January 29, 2001**Examiner: **Bui, Kieu Oanh T.**For: **Method and System for Object Retransmission Without A Continuous Network Connection
in A Digital Media Distributor System**

ENCLOSURES (check all that apply)

| | | | | | |
|--------------------------|-------------------------------------|---|--|---------------------------------------|---|
| <input type="checkbox"/> | Amendment/Reply | <input type="checkbox"/> | Assignment and Recordation Cover Sheet | <input type="checkbox"/> | After Allowance Communication to Group |
| <input type="checkbox"/> | After Final | <input type="checkbox"/> | Part B-Issue Fee Transmittal | <input checked="" type="checkbox"/> | Notice of Appeal |
| <input type="checkbox"/> | Information disclosure statement | <input type="checkbox"/> | Letter to Draftsman | <input checked="" type="checkbox"/> | Pre-Appeal Brief |
| <input type="checkbox"/> | Form 1449 | <input type="checkbox"/> | Drawings | <input type="checkbox"/> | Status Letter |
| <input type="checkbox"/> | (X) Copies of References | <input type="checkbox"/> | Petition | <input type="checkbox"/> | Postcard |
| <input type="checkbox"/> | Extension of Time Request * | <input type="checkbox"/> | Fee Address Indication Form | <input checked="" type="checkbox"/> | Other Enclosure(s) (please identify below): |
| <input type="checkbox"/> | Express Abandonment | <input type="checkbox"/> | Terminal Disclaimer | - Pre-Appeal Brief Request for Review | |
| <input type="checkbox"/> | Certified Copy of Priority Doc | <input type="checkbox"/> | Power of Attorney and Revocation of Prior Powers | | |
| <input type="checkbox"/> | Response to Incomplete Appln | <input type="checkbox"/> | Change of Correspondence Address | | |
| <input type="checkbox"/> | Response to Missing Parts | *Extension of Term: Pursuant to 37 CFR 1.136, Applicant petitions the Commissioner to extend the time for response for xxxxxx month(s), from to . | | | |
| <input type="checkbox"/> | Executed Declaration by inventor(s) | | | | |

CLAIMS

| FOR | Claims Remaining After Amendment | Highest # of Claims Previously Paid For | Extra Claims | RATE | FEE |
|--------------------|----------------------------------|---|--------------|------------|---------|
| Total Claims | 34 | 35 | 0 | \$ 50.00 | \$ 0.00 |
| Independent Claims | 3 | 5 | 0 | \$200.00 | \$ 0.00 |
| | | | | Total Fees | \$ 0.00 |

METHOD OF PAYMENT

| | |
|-------------------------------------|---|
| <input type="checkbox"/> | Check no. _____ in the amount of \$ _____ is enclosed for payment of fees. |
| <input checked="" type="checkbox"/> | Charge \$ <u>500.00</u> to Deposit Account No. <u>09-0460</u> (IBM Corporation) for payment of Notice of Appeal filing fee. |
| <input checked="" type="checkbox"/> | Charge any additional fees or credit any overpayment to Deposit Account No. <u>09-0460</u> (IBM Corporation) |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | |
|---------------|---|
| Attorney Name | Erin C. Ming, Reg. No. 47,797 |
| Signature |  |
| Date | May 22, 2006 |

CERTIFICATE OF TRANSMISSION

I hereby certify that this correspondence is being transmitted to Examiner Kieu-Oanh T. Bui via the USPTO EFS-Web on May 22, 2006.

| | |
|----------------------|---|
| Type or printed name | Jackie Tanda |
| Signature |  |